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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/517,980
	Filing Date	December 13, 2004
	First Named Inventor	James P. LANDERS
	Art Unit	1797
	Examiner Name	Timothy G. Kingan
	Attorney Docket Number	119620.0154

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 27557

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number: 27557

OR

<input type="checkbox"/>	Firm or Individual Name
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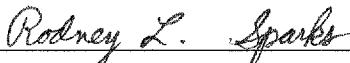
Address			
City			
Country	State	Zip	
Telephone	Email		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Rodney L. Sparks, J.D., Ph.D.		
Date	November 19, 2008	Telephone	(434) 243-6103

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.